

Signature:

Environmental Health 500 N. Main Street Suite #47 Monroe, NC 28112

Water Sample Request Form

T. 704.283.3553 unioncountyeh@unioncountync.gov www.unioncountync.gov

☐ INITIAL SAMPLE ☐ RE-SAMPLE	□ NEW WELL □ EXISTING WELL
Owner Information:	Site Information:
Name:	Road Name:
Address:	
	Subdivision:
Phone:	Lot#:
Email:	
Type of Water Sample Requested:	Type of Facility:
Bacteria (\$70) Nitrate/Nitrite (\$75)	House Mobile Home Farm/Business
☐ Inorganic (\$130) ☐ Iron Bacteria (\$80) ☐ Pesticide (\$110) ☐ Petroleum (\$105)	Trouse Trouse Torric Turniy Business
Inorganic kit (\$75)* Sulfur Bacteria (\$80)	Business: (type)
Herbicide (\$110) Anion Analysis: fluoride,	
Hexavalent Chromium chloride, sulfate (\$35) (\$100)	Number of Employees:
*Owner collects and mails to NC	
State Laboratory of Public written referral (\$10)	
Health. Kit must be picked up from Environmental Health	
office.	
Directions to Property from Monroe:	Brief Description of House:
	
Has well been chlorinated? Yes, Date No	Is there a water treatment system on the well? Yes, type: No
Where would you like the sample taken? Well Outside tap Inside tap	Is there power to the property/well? Yes No
Applicant Information: (if different from owner)	Comments:
Name:	
Address:	
Phone:	
Fax:	
Send results to: Owner Applicant	
	1